Form 8

FORM 8. Entry of Appearance

UNITED STATES COURT OF APPEALS FOR THE FEDERAL CIRCUIT		
FUZZYSHARP TECHNOLOGIES INC. v. INTEL CORPORATION		
No. 14-1261 CORRECTED		
ENTRY OF APPEARANCE		
(INSTRUCTIONS: Counsel should refer to Federal Circuit Rule 47.3. Pro se petitioners and appellants should read paragraphs 1 and 18 of the Guide for Pro Se Petitioners and Appellants. File this form with the clerk within 14 days of the date of docketing and serve a copy of it on the principal attorney for each party.)		
Please enter my appearance (select one):		
Pro Se As counsel for: FUZZYSHARP TECH. INC. Name of party		
I am, or the party I represent is (select one):		
Petitioner Respondent Amicus curiae Cross Appellant		
Appellant Appellee Intervenor		
As amicus curiae or intervenor, this party supports (select one):		
Petitioner or appellant Respondent or appellee		
		
My address and telephone are:		
Name: DAVID FINK		
Law firm: FINK & JOHNSON		
Address: 7519 APACHE PLUME City State and ZIP: HOUSTON TY 77071		
City, State and ZIP: HOUSTON, TX 77071 Telephone: 713 729-4991		
Fax #: 713 729-4951		
E-mail address: texascowboy6@gmail.com		
Statement to be completed by counsel only (select one):		
I am the principal attorney for this party in this case and will accept all service for the party. I agree to inform all other counsel in this case of the matters served upon me.		
I am replacing as the principal attorney who will/will not remain on the case. [Government attorneys only.]		
I am not the principal attorney for this party in this case.		
Date admitted to Federal Circuit bar (counsel only): 09/1994		
This is my first appearance before the United States Court of Appeals for the Federal Circuit (counsel only):		
Yes ✓ No		
A courtroom accessible to the handicapped is required if oral argument is scheduled.		
Feb. 6, 2014 /s/ David Fink		
Date Signature of pro se or counsel		
cc: James F. Valentine		

Form 30

FORM 30. Certificate of Service

UNITED STATES COURT OF APPEALS FOR THE FEDERAL CIRCUIT	
CERTIFICATE OF SERVICE	
I certify that I served a copy on counsel of record on by:	
■ US mail ■ Fax ■ Hand ■ Electronic Means (by email or CM/ECF)	
David Fink /s/David Fink	- Transmission
Name of Counsel Signature of Counsel	4
Law Firm Fink & Johnson	
Address 7519 Apache Plume	
City, State, ZIP Houston, TX 77071]
Telephone Number 713 729-4991	1
FAX Number 713 729-4951	
E-mail Address	
NOTE: For attorneys filing documents electronically, the name of the filer under whose log-in and password a document is submitted must be preceded by an "/s/" and typed in the space where the signature would otherwise appear. Graphic and other electronic signatures are discouraged.	